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1

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### **Application Information**

Title Line One::

Title Line Two::

Total Drawing Sheets:: Formal Drawings?::

Application Type:: Docket Number::

Passive Safety Device for

Needle of Blood Collection Set

19

Yes Utility

P-5890

# Representative Information

Representative Customer Number::

31948

# **Continuity Information**

This application is a::

>Patent One::

Issue Date::

Continuation-in-Part of

6,537,259

March 25, 2003

This application is a::

Continuation-in-Part of >Application One:: 10/370,924

Filing Date::

February 20, 2003

### **Assignee Information**

Assignee Name:: Street of mailing address:: City of mailing address:: State or Province::

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